

RECEIVED
FEC MAIL CENTER
2016 MAR 21 AM 7:23

Committee Name:

Students of America

If registered, FEC ID:

Today's Date:

3/14/16

Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,



Treasurer's Name:

Thomas Dehoff

, Treasurer

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Students of America

ADDRESS (number and street)

6524 Asmant Ct



(Check if address
is changed)

Cheyenne

CITY ▲

WY

STATE ▲

82009

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS



(Check if address
is changed)

Sawyer.Suben@gmail.com

Optional Second E-Mail Address

Coss9elliot49@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address
is changed)

2. DATE

03

11

2016

3. FEC IDENTIFICATION NUMBER ►

C

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Thomas Luke Delhoff

Signature of Treasurer

Thomas Delhoff

Date

03

11

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of
CandidateCandidate
Party AffiliationOffice
Sought:

House

Senate

President

State

District

- (c) ☒ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate

Ted Cruz

Party Committee:

- (d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) ☒ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. FEC ID number C
2. FEC ID number C
3. FEC ID number C
4. FEC ID number C

Write or Type Committee Name

None

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Zookeeper

Telephone number

307-421-7461

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Zookeeper

Telephone number

307-256-9965

Full Name of
Designated
Agent

Sawyer Allen Ruben

Mailing Address

6524 Armand Ct

Cheyenne

CITY

WY

STATE

82009-

ZIP CODE

Title or Position

President

Telephone number 307-631-9202

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Warren Federal Credit Union

Mailing Address

6523 Yellowstone Rd.

Cheyenne

CITY

WY

STATE

82009-

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

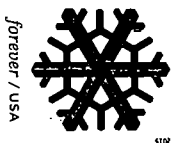
STATE

ZIP CODE

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Kristi Ruben
6524 Armand Ct
Cheyenne WY 82009-3525

Federal Election Commission
999 E. Street, N.W.
Washington D.C. 20463



NO POSTAGE
NECESSARY
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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER

MP

(3/2015)

DATE PREPARED

3/21/2016

20160321 14:00:00